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Copy to Dr Karen Ryan (0293158999)

Requested 22/10/2018
Collected 22/10/2018 08:17 AEDT
Received 22/10/2018 08:19 AEDT

Methylene Tetrahydrofolate Reductase Gene Mutation

MTHFR c.665C>T Heterozygous
MTHFR c.1286A>C Not Detected

Comments

Heterozygosity for either variant is common and not associated with clinical disease. There are no interventions recommended for patients who are heterozygous for these variants individually or who are compound heterozygotes.

Note new nomenclature: c.665C>T was previously C677T and c.1286A>C was previously A1298C.

NATA ACCREDITATION NO 2178

Thyroid Function

Test Name	Result	Units	Reference Interval
Free T4	14.3	pmol/L	9.0 - 19.0
Free T3	3.8	pmol/L	2.6 - 6.0

Supervising Pathologist: GC, NT

NATA ACCREDITATION NO 2178

Thyroid Autoantibodies

Thyroglobulin Ab 3.1 IU/mL <4.1
Thyroid Peroxidase Ab <0.5 IU/mL <5.6

Comments

From 06/09/17, Thyroid antibodies will be measured by the Abbott Architect (not Immulite) method and reported with new reference intervals.

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Random Urine Iodine

R-U-Creatinine	5.1	mmol/L
Urine iodine	22	ug/L

Comments

WHO classification of iodine deficiency: Urine iodine levels

Not iodine deficient:	>100 ug/L
Mild iodine deficiency:	50 - 100 ug/L
Moderate iodine deficiency:	20 - 49 ug/L
Severe iodine deficiency:	<20 ug/L

To convert iodine ug/L to iodine nmol/L

$\text{ug/L} \times 7.88 = \text{nmol/L}$

NHMRC recommends supplementation of 150ug/day of iodine to ensure that all women who are pregnant, breastfeeding or considering pregnancy have adequate iodine status. Women should not take kelp (seaweed) supplements or kelp based products because they may contain varying levels of iodine and may be contaminated with heavy metals such as mercury. Reported by Sullivan and Nicolaides Pathology, a member of the Sonic Healthcare Group.

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Vitamin B12 and Folate

Test Name	Result	Units	Reference Interval
Serum Folate	37.6	nmol/L	>7.0
Red Cell Folate	1019	nmol/L	>150

Comments

From 1st November 2014, Medicare rebates for folate testing will apply to patients at risk of folate deficiency such as in coeliac disease. Serum folate will be performed as an initial test with red cell folate performed additionally, if required, when the initial serum folate is low.

Supervising Pathologist: GC, NT

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